

This is a reasonably cheap paper-back volume and is laid out in two columns with a large number of text diagrams and tables. The illustrations, which are excellent, are printed on four plates in the middle of the book. These economies make the book a little difficult to read but in no way detract from its value. It is a scholarly work and at the end of each chapter there is a list of half-a-dozen books or reviews for more detailed reading as well as 50 to 100 references to the original papers. I hope the authors will not find it too great a burden to keep this book up to date, and compliment them and their publishers for getting this edition to the booksellers before it is out of date. P.C.E.

**NUTRITION AND DIETETICS FOR NURSES.** Mary E. Beck. Third Edition. (Pp. xii+227; Illustrated. £1.25). Edinburgh and London: Churchill Livingstone, 1971.

THIS is an excellent little book, readable, full of just the sort of information that nurses need and the sort of book that many housewives and parents would enjoy reading. As it is beneath the dignity of medical students to read a textbook for nurses it might be a good idea to republish the book under the title "Nutrition and Dietetics for Doctors" because the subject matter is better dealt with here than in many of the current textbooks of medicine.

In spite of the fact that this is a third edition the text shows very few of the characteristics of a revised text. There are very few places where the information does not conform to current views (as for instance in the precise mechanism of carbohydrate absorption and the description of insulin as a protein). I had to read the text right through to find these examples and was impressed also by the clear type and illustrations and the absence of misprints.

If a further edition is planned I would suggest the following alterations:—

- (a) That more detailed information be given about the way in which food can cause diseases, particularly infections. The dangers of Grade A unpasteurised milk could be emphasised and also the dangers of bulk preparation of infant and oesophageal feeds, with notes of their storage on the wards between preparation and use.
- (b) Low salt diets. These are described as of use in the treatment of heart failure and cirrhosis of the liver as well as in severe renal failure. In practice the widespread adoption of powerful diuretics for the treatment of heart failure and cirrhosis with ascites has replaced the low salt diet and produced salt depletion syndromes which should be prevented by dietary supplements.
- (c) Finally, there needs to be a short section on the dietary restrictions which need to be imposed when certain drugs are given, situations which are far commoner and just as important as the rare inherited diseases which are already dealt with in such detail. P.C.E.

**SOCIOLOGY IN MEDICINE** by M. W. Susser and W. Watson. Second Edition. Pp. xi+468; figs 45. Paper £3.50; boards £5.00). London: Oxford University Press, 1971.

SEVERAL medical schools in the U.K. have now introduced medical sociology into the medical undergraduate curriculum, and the appearance of a second edition of this book indicates the need for such a text book and its popularity. Sociology is concerned with the anatomy and physiology of society and medical sociology deals with those aspects of the subject which are relevant to the problems of disease.

Some of the most important health problems which confront us today such as addiction to alcohol, tobacco, cannabis or LSD, suicide and attempted suicide, gonorrhoea and many road accidents are caused by faulty patterns of behaviour. Such behaviour is now in fact more fatal in the Western World than the bacterium or virus.

Another area of human behaviour which is closely related to the health of the community lies in the realm of reproduction. A lack of responsibility in this aspect of behaviour has

led in the U.K. to increasing numbers of unwanted pregnancies with their toll of abortion and illegitimate babies and, in some countries, to serious overpopulation.

Susser and Watson's book deals with many of these problems and contrasts the health experiences of peasant and industrial populations and in different social classes.

The second edition has been enlarged by about one third due to the addition of material from the American experience of the authors and by the addition of many informative tables and diagrams.

The chapters on population, culture and health, social class and social mobility and health (chapters 1, 2, 3, 4 and 6) will be of most interest and relevance to the medical undergraduates, but medical students and doctors alike who wish to acquire the basic knowledge in this new and developing field will find the whole book of interest. It appears to be becoming the standard work in medical sociology. J.P.

**EMOTIONAL PROBLEMS OF THE STUDENT** by Graham B. Blaine Jr. and Charles C. McArthur. Second Edition. (Pp. xi+388; £3.00). London Butterworths, 1971.

WHY does a college need a psychiatrist? This book attempts to answer that question. It consists of a collection of articles by different authors, most of whom work in the Harvard University Health Service as psychiatrists, psychologists or counsellors.

At first the reader, with the editor, may wonder if the Harvard experience can be applied outside the U.S.A. However, anyone working with students anywhere will immediately recognise the various problems discussed, and find the case reports strikingly familiar.

The first nine chapters cover general problems including apathy, suicide and drug abuse. They are easy to read, informative and offer practical suggestions for therapy. The next five are of special interest as they discuss difficulties relating to studying. For example chapter 12 gives amusing but pertinent advice on note-taking and passing examinations. The last four chapters concern the special problems of women students, graduate students, business school students and medical students.

There is a lack of knowledge about the problems of the post-adolescent in general and of students in particular. This book presents the common syndromes clearly and recognisably. The final chapter on therapy is particularly helpful; it discusses the various forms of therapy available and also gives a straight-forward account of how short-term psychotherapy is actually conducted. This could readily be understood and utilised by therapists other than psychiatrists.

Anyone working with college students will find this book interesting and its general discussions deserve a wider audience. R.E.S.J.

**PHARMACOLOGY FOR MEDICAL STUDENTS** by J. P. D. Graham, B.Sc., M.D., F.R.F.P.S., F.R.C.P.E., F.R.S.E. Second Edition. (Paper £1.80; Boards £2.80) London: Oxford University Press, 1971.

I find this a useful book for quick reference, it contains a wealth of information, has a good index and the facts are concisely stated. The new edition is in the same paperback format as the old and the text is laid out in two columns with a large number of text tables and diagrams. The new edition is 30 pages longer, has two extra pages of black and white photographs and is double the price of the 1966 edition. I am not sure that it is the ideal textbook for medical students for a number of reasons. It is not easy to read because of the highly compressed almost telegraphic style of writing. This makes it more suitable for revision than for primary study. It is too big (21 x 27 cm) to carry in the pocket for reference while working on the wards and its comments on treatment are often misleading.

"Treatment. Acidemia may be treated by reducing the production of excess acid in diabetes by administration of insulin and dextrose; by promoting the excretion of fixed acids by giving excess of fluids and a diuretic; by neutralizing acidity by intravenous infusion of solutions of bicarbonate or lactate, or by increasing the excretion of carbon dioxide by stimulating breathing."